

ISSUE SLIP STATE AREA (for additional cross references)

POSITION	INITIALS	IC NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		8	04/20/01
FORMALITY REVIEW	KQ	JCD/705	03/06/01
RESPONSE FORMALITY REVIEW	MJ	JCN	04/06/01

INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral)..... Cancelled  
 + ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
 staple additional sheet here

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H.S.  
 7-6-01  
 C-571  
 03/06/01